

SURETY BOND

STATE OF LOUISIANA
LOUISIANA PUBLIC SERVICE COMMISSION
POST OFFICE BOX 91154, BATON ROUGE, LOUISIANA 70821-9154

Louisiana "Do Not Call Program"

Bond No. _____

KNOW ALL MEN BY THESE PRESENTS:

That we, _____

of this City of _____ State of _____ As Principal

hereinafter called Principal, and

a Corporation organized and existing under the laws of the State of _____ and duly authorized to transact business in the State of Louisiana, as surety, hereinafter called Surety are held and firmly bound unto the State of Louisiana, in the sum of Fifty Thousand (\$50,000) Dollars, lawful money of the United States, payable to the Louisiana Public Service Commission, State of Louisiana for the use and benefit of the State or any injured party, by reasons of the principle's failure to comply with the provisions of La. R.S. 45:844.11-15 or Louisiana Public Service Commission General Order dated November 7, 2001, for the payment of which said Principal and Surety bind themselves, their heirs, administrators, executors, successors and assigns, jointly and severally, firmly by these presents.

WHEREAS, the Principal has registered with and requested a permit from the Louisiana Public Service Commission to utilize Telephone Solicitation under the Telephone Solicitation Relief Act of 2001, La. R.S. 45:844.11 through La. R.S. 45:844.15 and Louisiana Public Service Commission General Order on Telephone Solicitation Relief Act of 2001 dated November 7, 2001 which Act and General Order provides for an applicant to register for a permit as a telephone solicitor within the within the State of Louisiana to file a surety bond in the sum of Fifty Thousand (\$50,000) Dollars.

NOW, THEREFORE, THE CONDITION OF THIS OBLIGATION is such that, if Principal shall faithfully comply with all terms, conditions, provisions and requirements of the Telephone Solicitation Relief Act of 2001, La. R.S. 45:844.11 through La. R.S. 45:844.15 and regulations as stated in Louisiana Public Service Commission General Order on Telephone Solicitation dated November 7, 2001 as adopted by the Louisiana Public Service Commission, then this obligation shall be null and void, otherwise it shall remain in full force and effect.

FURTHER the bond shall not be subject to cancellation by either the principal or the surety unless written notice of intent to cancel is forwarded by the surety and/or the principal to the Louisiana Public Service Commission, located at One American Place, Suite 1630, Baton Rouge, Louisiana, at least ninety (90) days prior to the effective date of cancellation. If the cancellation is at the request of the surety, the surety shall also provide the principal with written notification at least ninety (90) days prior to the effective date of the cancellation. Any such cancellation will be effective prospectively only. The surety and principal will remain liable until prescription runs for any actions committed or omitted during the period in which the bond was in effect. It shall be the responsibility of the principal to ensure the bond amount shall never be less than \$50,000 at all times.

FURTHER, the Principal shall pay any and all fines, penalties, and damages including, but not limited to expenses and attorney fees, and shall indemnify any person suffering a loss or damage from the

acts of any and all persons engaged as agents of the Principal as a result of any violation of the Telephone Solicitation Relief Act of 2001, La. R.S. 45:844.11 through La. R.S. 45:844.15, and regulations as stated in Louisiana Public Service Commission General Order on Telephone Solicitation dated November 7, 2001.

PROVIDED, however, that the liability of the Surety shall in no event exceed the sum of Fifty Thousand (\$50,000) Dollars in the aggregate for any and all claims thereunder.

THIS BOND SHALL BECOME EFFECTIVE THE _____ day of _____, 20__.

SIGNED, SEALED AND DATED THIS _____ day of _____, 20__.

Principal

Surety

Signature Title

Signature Attorney-In-Fact

Name of Representative

Name of Insurance or Bonding Agency

Address

Address

City, State, Zip Code

City, State, Zip Code

Telephone Number

Telephone Number

Fax Number

Fax Number

Received this _____ day of _____, 20__